

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		59	12/3
FORMALITY REVIEW	geh	1020	4-4-61
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	7/31/61
2	8/1/61
3	8/2/61
4	8/3/61
5	8/4/61
6	8/5/61
7	8/6/61
8	8/7/61
9	8/8/61
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31	8/30/61
32	8/31/61
33	9/1/61
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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